

Criminal Case Cover Sheet**U.S. District Court - District of Massachusetts**

Place of Offense: _____	Category No. _____	Investigating Agency _____	United States Postal Inspection Service
City New Bedford	Related Case Information:		
County Bristol	Superseding Ind./ Inf. _____	Case No. _____	
	Same Defendant _____	New Defendant _____	
	Magistrate Judge Case Number _____		
	Search Warrant Case Number _____		
	R 20/R 40 from District of _____		
Defendant Information:		Is this case related to an existing criminal action pursuant to Rule 40.1(h)? If yes, case number _____	
Defendant Name Joseph Smith			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this person an attorney and/or a member of any state/federal bar: _____			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Alias Name: _____			
Address: 69 Nelson St, Apt. 2, New Bedford, MA 02744			
Birth date (Yr only): 1953		SSN (last 4#): 8201	Sex: M
		Race _____	Nationality: _____
Defense Counsel if known: _____		Address: _____	
Bar Number: _____			
U.S. Attorney Information			
AUSA: Benjamin A. Saltzman		Bar Number if applicable: 683169	
Interpreter: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		List language and/or dialect: _____	
Victims: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, are there multiple crime victims under 18 USC§3771(d)(2) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Matter to be SEALED: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<input checked="" type="checkbox"/> Warrant Requested		<input type="checkbox"/> Regular Process	<input checked="" type="checkbox"/> In Custody
Location Status: Bristol House of Correction			
Arrest Date: _____			
<input type="checkbox"/> Already in Federal Custody as of _____ in _____.			
<input type="checkbox"/> Already in State Custody at _____ <input type="checkbox"/> Serving Sentence <input type="checkbox"/> Awaiting Trial			
<input type="checkbox"/> On Pretrial Release: Ordered by: _____ on _____			
Charging Document: <input checked="" type="checkbox"/> Complaint		<input type="checkbox"/> Information	<input type="checkbox"/> Indictment
Total # of Counts: <input type="checkbox"/> Petty _____		<input type="checkbox"/> Misdemeanor _____	<input checked="" type="checkbox"/> Felony 2 _____
Continue on Page 2 for Entry of U.S.C. Citations			
<input checked="" type="checkbox"/> I hereby certify that the case numbers of any prior proceedings before a Magistrate Judge are accurately set forth above.			

District Court Case Number (To be filled in by deputy clerk): _____

Name of Defendant Joseph Smith _____

U.S.C. Citations

	Index Key/Code	Description of Offense Charged	Count Numbers
Set 1	<u>18 U.S.C. § 641</u>	<u>Theft of government benefits</u>	<u>1</u> _____
Set 2	<u>18 U.S.C. § 371</u>	<u>Conspiracy</u>	<u>2</u> _____
Set 3	_____	_____	_____
Set 4	_____	_____	_____
Set 5	_____	_____	_____
Set 6	_____	_____	_____
Set 7	_____	_____	_____
Set 8	_____	_____	_____
Set 9	_____	_____	_____
Set 10	_____	_____	_____
Set 11	_____	_____	_____
Set 12	_____	_____	_____
Set 13	_____	_____	_____
Set 14	_____	_____	_____
Set 15	_____	_____	_____

ADDITIONAL INFORMATION: